wic program manual

WIC 210-60.6

SECTION: CERTIFICATION

SUBJECT: Eligibility Requirement

ITEM: Infants/Children: Dietary



Policy

Participants determined eligible for program benefits based on a dietary risk shall meet one or more of the criteria listed below. Refer to WPM Section 230-10 for information regarding the priority ranks.

Basis for policy

CFR 246.7 (e)

Indicators of need for infants/children

All indicators of nutritional need apply to infants and/or children.

Dietary intake criteria

Table 1 includes the dietary intake criteria to assess indicators of nutritional need for infants and children. The priority levels are indicated for infants and children, and the ISIS code and corresponding USDA risk code is provided in the far left column for reference. Please see the USDA "WIC" Policy Memorandum 98-9, WIC Nutrition Risk Criteria" for more detail regarding the USDA risk codes.

TABLE 1

ISIS CODE AND (USDA CODE)	RISK CONDITION/INDICATOR OF NUTRITIONAL NEED	PRIORITY FOR INFANTS	PRIORITY FOR CHILDREN
D10 (401, 422)	Low Intake (typical daily intake of less than the minimum number of servings from one or more of the food groups)	N/A	V
D11 (401, 422)	Low Vitamin A (typical daily intake of less than one serving per day as specified in State nutrition education material; see Table 2 for vitamin A rich foods)	N/A	V

October 1, 1999 Page 1 of 9

ISIS CODE AND	RISK CONDITION/INDICATOR	PRIORITY FOR	PRIORITY FOR
(USDA CODE)	OF NUTRITIONAL NEED	INFANTS	CHILDREN
D12 (401, 422)	Low Vitamin C (typical daily intake of less than one serving per day as specified in State nutrition education material; see Table 3 for vitamin C rich food)	N/A	V
D13 (401, 422)	Low Fruit/Vegetables (typical daily intake of less than the minimum number of servings)	N/A	V
D14 (401, 422)	Low/Breads/Grains/ Cereals (typical daily intake of less than the minimum number of servings)	N/A	V
D15 (401, 422)	Low Milk (typical daily intake of less than the minimum number of servings)	N/A	V
D16 (401, 422)	Low Protein (typical daily intake of less than the minimum number of servings)	N/A	V
D18 (401, 422)	Low Fluid (as determined by local agency nutritionist/registered dietitian)	N/A	V
D19 (401, 422)	Low Fiber (as determined by local agency nutritionist/registered dietitian)	N/A	V
D20 (401, 422)	Low Iron (as determined by local agency nutritionist/registered dietitian)	N/A	V

October 1, 1999 Page 2 of 9

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ISIS CODE	RISK	PRIORITY	PRIORITY
AND	CONDITION/INDICATOR	FOR	FOR
(USDA CODE)	OF NUTRITIONAL NEED	INFANTS	CHILDREN
D90	High Sugar Intake	N/A	V
	(as determined by local agency		\geq 2 years
(401)	nutritionist/registered dietitian)		_ ,
D91	High Fat Intake	N/A	V
(407)	(as determined by local agency		\geq 2 years
(401)	nutritionist/registered dietitian)		
D92	High Sodium/Salt	N/A	V
	(as determined by local agency	1 1/11	> 2 years
(401)	nutritionist/registered dietitian)		
D95	Inappropriate Feeding	IV	V
	Practices:		
(411, 425)	*Infants (()		
	*Infants (routine use of): • feeding goat's milk, sheep's		
	milk, imitation milks, or		
	substitute milks in place of		
	breast milk or FDA-		
	approved infant formula		
	during the first year of life,not using a spoon to		
	introduce and feed early		
	solids,		
	• infant not beginning to		
	finger feed by 7-9 months,		
	• feeding solids in a bottle (including enlarging the		
	nipple to accommodate		
	thickened liquids),		
	using a syringe-action pingle feeder.		
	nipple feeder, • feeding foods of		
	inappropriate consistency,		
	size or shape that put the		
	infant at risk of choking,		

October 1, 1999 Page 3 of 9

ISIS CODE	RISK	PRIORITY	PRIORITY
AND	CONDITION/INDICATOR	FOR	FOR
		_	
(USDA CODE) D95 (continued)	 inappropriate, infrequent or highly restrictive feeding schedules or forcing an infant to eat a certain type and/or amount of food, feeding any amount of honey to infant under 1 year of age (added to liquids or solid foods, used in cooking, as part of processed foods, on a pacifier, etc.). *Children (routine consumption or feeding of): 12 or more ounces of fruit juice/d, non-fat or reduced-fat milks as primary milk source between 12 and 24 months of age, foods low in essential nutrients and high in calories that replace ageappropriate nutrient dense foods needed for growth and development between 12 and 24 months of age, foods of inappropriate consistency, size, or shape that put children less than 4 years of age at risk of choking. *Children (routine use of any of the following inappropriate feeding practices): Forcing a child to eat a certain type and/or amount of food, ignoring a child's requests for appropriate foods, restricting a child's requests for appropriate foods, restricting a child's ability to consume nutritious meals at an appropriate frequency per day, 	INFANTS	CHILDREN
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October 1, 1999 Page 4 of 9

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ISIS CODE	RISK CONDITION/INDICATOR	PRIORITY	PRIORITY
AND	OF NUTRITIONAL NEED	FOR INFANTS	FOR CHILDREN
(USDA CODE)		INFANIS	CHILDREN
D95 (continued)	 not supporting a child's need for growing independence with self feeding (e.g., spoon-feeding a child who is able and ready to finger-feed and/or try self-feeding with appropriate utensils), feeding or offering a child primarily pureed or liquid food when the child is ready and capable of eating foods of an appropriate texture. 		
D96	Inappropriate Use of	IV	V
(419)	Baby Bottles (e.g., routine use of bottle to feed liquids other than breast milk, formula, or water; use of bottle for feeding or drinking beyond 14 months of age)		
D97	Early Introduction to Solids into Daily Diet:	IV	N/A
(412)	before 4 months of age	TT 7	27/4
D98 (411)	Delay Solids: failure to introduce by 7 months of age	IV	N/A
D100 (402, 403)	Vegan Diets: consumption of plant origin foods only, and eating not animal products, and avoidance of foods make with animal ingredients. Highly Restrictive Diets: diets low in calories, severely limit intake of important food sources of nutrients, or otherwise involve high-risk eating patterns	IV	V

October 1, 1999 Page 5 of 9

wic program manual

WIC 210-60.6

ISIS CODE AND (USDA CODE)	RISK CONDITION/INDICATOR OF NUTRITIONAL NEED	PRIORITY FOR INFANTS	PRIORITY FOR CHILDREN
D101 (411)	Inadequate Formula or Breastmilk: infant routinely not fed infant formula or breastmilk as a primary source of nutrients during the first 6 months of life (e.g., infants prescribed low iron formula without iron supplementation)	IV	N/A
D102 (414)	No Routine Age- Appropriate Source of Iron After 4-6 Months of Age	IV	N/A
D103 (415)	Improper Dilution of Formula: routine overdilution or underdilution of formula; failure to follow manufacturer's dilution instructions accompanying a prescription	IV	N/A
D104 (416)	Feeding Other Foods Low in Essential Nutrients: routinely consuming foods low in essential nutrients and high in calories, or caffeine-containing foods or beverages that replace or are in addition to age- appropriate nutrient dense foods needed for growth and development	IV	N/A
D105 (417)	Lack of Sanitation in Preparation, Handling and Storage of Formula or Expressed Breastmilk: limited knowledge or access to facilities to assure that water, bottles, and nipples used for feeding infants have been properly sanitized	IV	N/A

October 1, 1999 Page 6 of 9

wic program manual

WIC 210-60.6

ISIS CODE AND (USDA CODE)	RISK CONDITION/INDICATOR OF NUTRITIONAL NEED	PRIORITY FOR INFANTS	PRIORITY FOR CHILDREN
D105 (cont.)	 no access to safe water supply or stove for sanitation, failure to practice appropriate sanitation techniques in preparing bottles, and failure to properly handle prepared formula. 		
D107 (413)	Feeding Cow's Milk as the Primary Source of Milk in First 12 Months	IV	N/A

October 1, 1999 Page 7 of 9

Minimum number of servings for children The local agency shall use nutrition education materials that are consistent with the State approved nutrition education materials. The number of recommended servings and portion sizes for each food group should reflect the number of servings provided by the State WIC Branch nutrition education materials. Dietary risk/indicator of nutrition need shall be determined upon the minimum number of servings and minimum portion size as stated in current nutrition education materials for pregnant women, postpartum women and children ages 1-5.

Vitamin A rich foods

Table 2 includes a listing of vitamin A rich foods.

TABLE 2

Fruit	Juice	Vegetables
Apricots Cantaloupe Mango Papaya	Apricot nectar Vegetable juice cocktail	Bok choy Beet greens Carrots Chard, Swiss Collards Dandelion greens Kale Mustard greens Parsley Peppers: hot, chili Pumpkin Onions, green Spinach Squash, winter Sweet potato Tomatoes, red Yams

October 1, 1999 Page 8 of 9

Vitamin C rich foods

Table 3 includes a listing of vitamin C rich foods.

TABLE 3

Fruit	Juice	Vegetables
Cantaloupe	Orange	Broccoli
Grapefruit	Grapefruit	Brussel sprouts
Guava	Lemon	Cabbage
Kiwi	Fruit juices enriched with	Cauliflower
Lemon	vitamin C	Peppers: hot, chili
Mango	Tomato juice	Peppers: sweet
Orange	Vegetable juice cocktail	Snow peas
Papaya		Tomatoes: green, red
Strawberries		Tomato paste
Tangerine		Tomato puree

October 1, 1999 Page 9 of 9